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	Subclass	ISSUE CLASSIFICATION
	Class	

PATENT NUMBER

U.S. **UTILITY** Patent Application

O.I.P.E.	PATENT DATE
SCANNED ____ Q.A ____	

TR3

APPLICATION NO.	CONT/PRIOR	CLASS	SUBCLASS	ART UNIT	EXAMINER
09/864389	D	623	1.15	3738 3731	BUI

APPLICANTS: Jacob Richter
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TITLE: Longitudinally flexible stent

PTO-2040
12/99

ISSUING CLASSIFICATION

ORIGINAL		CROSS REFERENCE(S)	
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)
INTERNATIONAL CLASSIFICATION			
			☐ Continued on Issue Slip Inside File Jacket

☐ TERMINAL DISCLAIMER	DRAWINGS			CLAIMS ALLOWED	
	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.
☐ The term of this patent subsequent to _____ (date) has been disclaimed.	(Assistant Examiner) (Date)			NOTICE OF ALLOWANCE MAILED	
☐ The term of this patent shall not extend beyond the expiration date of U.S Patent. No. _____	(Primary Examiner) (Date)			ISSUE FEE	
				Amount Due	Date Paid
☐ The terminal ____months of this patent have been disclaimed.	(Legal Instruments Examiner) (Date)			ISSUE BATCH NUMBER	

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